

No. <b>C105867</b>	<b>Annual Report Form</b> Due No Later Than November 30, <b>1996</b>	2. Registered Agent and Office <b>NOT A P.O. BOX</b>  <b>NELI MOORE</b> <b>925 PRESTON</b>  <b>LEWISTON ID 83501</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FEE REQUIRED</b>	1. Mailing Address - Please Correct, If Not Correct  <b>VALLEY SOCIETY FOR THE PREVE</b> <b>NELI MOORE</b> <b>925 PRESTON</b>  <b>LEWISTON ID 83501</b>	3. Organized Under the Laws of:  <b>ID C105867</b>			
<b>* FIRST NOTICE *</b>					
4. Corporations: Enter Names and Addresses of <b>President, Secretary and Directors</b> Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> <b>Managers</b> or <input type="checkbox"/> <b>Members</b> (check one)					
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
PRES.	NELI MOORE	925 PRESTON	LEWISTON	ID	83501
V. PRES.	TOM MOORE WILLIAMS	1035 POWERS	LEWISTON	ID	83501
SEC/TREA.	JOY CLONINGER	3415 11th St	LEWISTON	ID	83501
DIRECTOR	JEANNIE COOK	1904 12th Ave	LEWISTON	ID	83501
DIRECTOR	GLADES HILL	926 PRESTON	LEWISTON	ID	83501
DIRECTOR	DONAVAN HOLLIS	206 5th St	LEWISTON	ID	83501
DIRECTOR	MARGE SEARIS	3730 11th St	LEWISTON	ID	83501
5. NATURE OF BUSINESS  <b>PREVENTION CRUELTY</b>		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature <u>Neli Moore</u> Date <u>10-30-96</u> Name (Typed or Printed) <u>NELI MOORE</u> Title <u>PRES</u>			

ISSUED: 07-06-1996

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